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CONFIRMATION NO. 9650

|  |   |                                    |   |   |                                |
|--|---|------------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/728,312   | <b>FILING OR 371(c) DATE</b><br>12/04/2003<br><b>RULE</b>   | <b>CLASS</b><br>128                | <b>GROUP ART UNIT</b><br>3771   | <b>ATTORNEY DOCKET NO.</b><br>821-011725-US (PAR) |                                |
| <b>APPLICANTS</b><br>Dieter Hochrainer, Schmallenberg, GERMANY;<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/438,979 01/09/2003 <i>OK</i><br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 10258360 12/12/2002 <i>OK</i><br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 04/01/2004</b>    |   |                                    |   |   |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <i>Allowance</i><br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>20                         | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>28518  |   |                                    |   |   |                                |
| <b>TITLE</b><br>Powder inhaler comprising a chamber for a capsule for taking up a non-returnable capsule being filled with an active ingredient  |   |                                    |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>986  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |